

COMMONWEALTH OF MASSACHUSETTS  
DEPARTMENT OF CORRECTION - HEALTH SERVICES DIVISION

DOC DIVISION OF HEALTH SERVICES - ORGANIZATION  
103 DOC 601

TABLE OF CONTENTS

601.01	Responsible Health Authority.....	2
601.02	Relationship with Superintendents.....	3
601.03	Organization of Division Management.....	4
	Health Services Duty Officer .....	4
	Division Management Team .....	4
	Deputy Director.....	4
	Regional Administrator.....	5
	Mental Health Administrators.....	8
	Special Projects Manager.....	8
601.04	Contractual Medical Providers.....	9
	Senior Medical Consultant .....	9
	Senior Mental Health Consultant .....	10
	Program Director .....	10
	Medical Director at Bridgewater State Hospital ..	11
601.05	Committee Structure.....	11
	Health Services Executive Committee .....	11
	Quality Assurance Mortality Review Committee ....	12
	Quality Assurance Suicide Review Committee .....	13
	Medical Records Committee .....	14
	Policies and Procedures Committee .....	14
601.06	Administrative Meetings.....	16
	Lemuel Shattuck Hospital .....	16
	Quarterly Regional Meetings .....	16
	Case Conference Meetings .....	16
	Monthly Regional/Mental Health Administrator	
	Meetings.....	17
601.07	Administrative Reports.....	17
601.08	Health Service Audits.....	17

MASSACHUSETTS DEPARTMENT OF CORRECTION	DIVISION: Health Services
TITLE: Health Services Organization	NUMBER: 103 DOC 601

**PURPOSE:** The purpose of this policy is to establish the organization of the Massachusetts Department of Correction health services division

**REFERENCES:** MGL, Ch. 124, S 1 c q and S 18; MGL 125, S 14  
ACA Standard: 3-4326,3-4327,3-4328,3-4329,3-4334  
NCCHC Standard: P-02, P-03, P-04, P-05

**APPLICABILITY:** Health Service                      **PUBLIC ACCESS:** Yes  
Division, Contractual Medical Provider

**LOCATION:** DOC Central Policy File                                              Facility  
Policy File  
Health Services Division Policy File

**RESPONSIBLE STAFF FOR IMPLEMENTATION AND MONITORING OF POLICY:**  
Director of Health Services  
Superintendent

**PROMULGATION DATE:** 7-17-02                      **EFFECTIVE DATE:** 8-17-02

**CANCELLATION:** This policy cancels all previous department policy statements, bulletins, directives, orders, notices, rules, and regulations regarding health services division organization which are inconsistent with this policy.

**SEVERABILITY CLAUSE:** If any part of this policy is for any reason held to be in excess of the authority of the Commissioner, such decision will not affect any other part of this policy.

601.01      Responsible Health Authority

The overall health authority for the Department of Correction is the Director of Health Services. As health authority, the Director of Health Services is responsible for arranging and providing accessible quality medical, dental and mental health care to all inmates, according to the standards of the American Correctional Association (ACA) and National Commission on Correctional Health Care (NCCHC) and applicable regulations. In carrying out that responsibility, the Director of Health Services delegates the on-site authority to each facility's health services administrator who is a full time employee of the contractual medical provider. As the facility health authority, the health service administrator is responsible for arranging all levels of health care and forensic mental health services and for assuring that all inmates have access to quality medical and mental health care.

The Director of Health Services will provide oversight of administration, organization and planning of medical, mental health and dental services provided by the contractual medical provider.

The Director of Health Services shall have the responsibility to:

1. Recommend to the Commissioner and Deputy Commissioner and contractual program director policies which relate to the delivery of health services to inmates in the care and custody of the Department;
2. Perform contract development, negotiation, and supervision of the vendor selection process;
3. Review and approve procedures that are developed by the contractual medical provider relating to health care delivery;
4. Assist and advise superintendents in meeting the specific health care needs of their facility's population;

5. Prepare an annual budget for the delivery of health care services in the Department's facilities;
6. Ensure that the contractual medical provider meets its responsibility for providing quality medical, dental, and mental health services for inmates/ detainees at each DOC facility and forensic mental health services for patients at Bridgewater State Hospital as required by the contractual agreement;
7. Assist the contractual medical provider to determine the health care personnel staffing patterns for each facility;
8. Oversee an external organizational process for reviewing, planning, monitoring, and managing the quality and appropriateness of care provided to inmates by the contractual medical provider;
9. Ensure contract compliance by monitoring and evaluating the quality and efficiency of the contractual clinical services;
10. Approve and ensure that the contractual medical provider participates in a quality assurance program;
11. Oversee and ensure utilization review of all health services provided to inmates not covered under a contractual health care agreement;
12. Approve all division of health service policies and procedures;
13. Prepare budgets and provide financial management of division operations including payroll functions;
14. Provide fiscal monitoring of contractual medical services; and
15. Supervise accounting, purchasing and resource allocation functions of the division.

601.02      Relationship with Superintendents

Health care delivery within each facility is a mutual concern of the Department and contractual clinical provider. Matters of clinical judgment are the sole province of the licensed health care professionals (ie physician, dentist), however, all health care providers shall ensure that the delivery of health care is in accordance with the security requirements of the facility as determined by the superintendent. The Director of Health Services and the division management team will establish close communication with all superintendents to assure that these mutual interests are properly represented.

601.03      Organization of Division Management

1.    The following personnel shall comprise the health services division management team:
  - a.    Director of Health Services
  - b.    Deputy Director of Health Services
  - c.    Mental Health Administrator
  - d.    Regional Administrators
  - e.    Special Projects Manager

2.    Health Services Duty Officer

The Deputy Director, Regional Administrators, Mental Health Regional Administrator and Special Projects Manager shall function as the health service duty officer on a regular rotational basis during non-business hours in addition to their other responsibilities.

3.    Job Duties for the Division Management Team

- a.    The Deputy Director of health services shall report directly to the Director of Health Services and shall function as the acting Director of Health Services in his/her absence.

The Deputy Director shall routinely have the delegated authority to:

- i. Assist with the development of requests for response (RFRs) and the supervision of the vendor selection process;
- ii. Assist with contract development, negotiation and administration;
- iii. Provide direct administrative supervision of division staff;
- iv. Oversee organizational process for planning, reviewing, and monitoring the quality and appropriateness of care provided by the contractual medical provider;
- v. Oversee the quality assurance/quality improvement program implemented by the contractual medical provider;
- vi. Ensure utilization review of all health services provided to inmates not covered under the contractual clinical agreement;
- vii. Monitor the contractual medical provider's compliance with appropriate standards and regulations;
- viii. Monitor and implement division of health services policies and procedures.
- ix. Assist in the preparation of budgets and in the financial management of division operations including payroll functions;
- x. Assists in the fiscal monitoring of contractual medical services;
- xi. Assists in the supervision of accounting, purchasing and resource allocation functions of the division;
- xii. Provide administrative oversight of health services provided to inmates not covered under the contractual clinical agreement;

b. Administrators regional areas of responsibility

- i. The Mental Health Administrator shall be responsible for monitoring and evaluating the quality of mental health

services throughout the Department. The mental health administrator will monitor the contractual medical provider's compliance with appropriate standards, regulations and contract requirements.

- ii. Regional administrators shall be responsible for monitoring and evaluating the quality of health services and will be assigned designated facilities from the following list:

Bay State Correctional Center, Boston Pre-Release Center, Bridgewater State Hospital, MCI Cedar Junction, Concord, MCI Framingham, Massachusetts Alcohol and Substance Center (MASAC), Massachusetts Treatment Center, MCI Norfolk, North Central Correctional Center, Old Colony Correctional Center Medium and Minimum, MCI Plymouth, Pondville Correctional Center, MCI Shirley Medium and Minimum, South Middlesex Correctional Center, Souza Baranowski Correctional Center

- c. The six Regional Administrators shall report to the Deputy Director and may function as the Acting Deputy Director in the event of the Deputy Director's absence. The Regional Administrators shall routinely have the delegated authority to:

- i. Oversee the overall quality and effectiveness of contractual health services by providing direct, on-site monitoring of services;
- ii. Ensure all contractual health services provided to inmates is of high quality and in compliance with National Commission on Correctional Health Care, American Correctional Association and professional standards, and

- Massachusetts Department of Public Health regulations;
- iii. Act as liaison to the superintendents at assigned facilities as well as being on-call in order to ensure facility needs are being met;
  - iv. Conduct and document random audits, every four months, at each facility using predetermined performance criteria as well as approved standards of care and practice;
  - v. Ensure compliance with health services division (103 DOC 600 series) policies;
  - vi. Review the quality of documentation in medical records;
  - vii. Serve as a resource to the assigned facility's management team in order to provide input and evaluation of the quality of contractual clinical services being provided.
- d. The Contract Manager shall routinely have the delegated responsibility to:
- i. Audit all reports submitted by the contractual medical provider for contract compliance and identification of issues.
  - ii. Attend each medical records committee meeting (see 601.05, 6.).
  - iii. Attend each policy and procedure committee meeting.
  - iv. Act as liaison with the State Office of Pharmacy Services (SOPS).
- e. The Mental Health Regional Administrator shall report directly to the Deputy Director and may function as the Acting Deputy Director in the event of the Deputy Director's absence.
- f. The Mental Health Regional Administrator shall routinely have the delegated authority to:



- i. Oversee the overall quality and effectiveness of contractual mental health services by providing direct, on-site monitoring of services;
  - ii. Ensure all contractual mental health services provided to inmates is of high quality and in compliance with National Commission on Correctional Health Care, American Correctional Association and professional standards; and Massachusetts Department of Mental Health regulations;
  - iii. Conduct random audits at each facility using predetermined performance criteria as well as approved standards of care and practice;
  - iv. Ensure compliance with health services division policies;
  - v. Review the quality of documentation in medical records;
  - vi. Serve as a resource to the assigned facilities' management team in order to provide input and evaluation of the quality of contractual mental health services being provided.
- f. The Special Projects Manager shall report directly to the Deputy Director and may function as the Acting Deputy Director in the event of the Deputy Director's absence.

The Special Projects Manager shall routinely have the delegated authority to:

- i. Review, and revise for the Director's approval all policies and procedures for the Health Services Division;
- ii. Provide direct supervision of support staff; and
- iii. Handle all special inquiries and projects as directed by the Director and Deputy Director.

601.04      Contractual Medical Providers

The Department shall ensure that contractual arrangements are maintained with licensed practitioners or practitioner group(s) for the provision of all medical, mental health, dental, and forensic mental health services. This includes the disciplines of medicine, psychiatry, nursing, social work, psychology, mental health workers, lab and x-ray technicians, physician assistants, nurse practitioners, pharmacists, occupational and physical therapists, dietitians, dentists, dental assistants and other paramedical or technical support staff.

The contractual medical provider shall be chosen through a competitive selection process and shall be required to comply with all Department policies and procedures. Each health services contract shall be approved by the Director of Health Services and Deputy Director.

The provider shall have the sole and exclusive right to hire and fire or terminate personnel working for them and their subcontractor(s). The director of health services may deny entrance of any personnel to any or all facilities. He/she will notify the provider's program director of such denials and the reason for them as soon as reasonably practical.

The following key contractual professional personnel shall provide the services listed below:

1. The Senior Medical Consultant shall be a licensed physician who shall advise the Director of Health Services on matters relating to clinical programs and protocols. This individual shall undertake special projects that are delegated by the Director of Health Services and shall be responsible for developing peer review mechanisms for contractual medical care providers. It will be necessary for him/her to participate in Quality Assurance Mortality Reviews. The Senior Medical Consultant shall not be involved in the provision of direct care to inmates of the Department.
2. The Senior Mental Health Consultant shall be a licensed psychiatrist who shall report to the

Director of Health Services and advise him/her on matters relating to the mental health and forensic mental health services provided by the contractual clinical group. This individual shall undertake special projects which are delegated by the director of health services and shall be responsible for developing peer review mechanisms for contractual psychiatric care providers. It will be necessary for this individual to participate in quality assurance suicide reviews. The Senior Mental Health Consultant shall not be involved in the provision of direct care to inmates/ of the Department.

3. The Program Director of the contractual clinical group shall report to the Director of Health Services for administrative supervision. The program director shall be responsible for the overall clinical supervision of medical treatment in the facilities as well as administrative supervision of all medical, mental health, forensic mental health, paramedical, and ancillary personnel under the auspices of his/her contractual clinical group. Any subcontracts utilized by the contractual clinical group shall have an administrator designated by the program director. No significant subcontracts shall be granted by the program director without the prior written consent of the Director of Health Services.
4. The Medical Director at Bridgewater State Hospital shall be appointed pursuant to MGL c.125, Section 18, which reads as follows: "The Commissioner, with approval of the Commissioner of mental health, shall appoint a physician as medical director of the Bridge-water state hospital. The medical director shall have the care of the inmates thereof and govern them in accordance with rules and regulations approved by the Commissioner. (Added by St.1955, c 770, Section 11.)"

With the contractual medical provider, the Director of Health Services shall establish the following committees in order to maintain proper communication and to provide a forum for the discussion of important issues. Each committee meeting shall be documented with minutes which shall be maintained in the division of health services.

1. Health Services Executive Committee:

The Director of Health Services shall establish a health services executive committee which shall meet as needed. This committee shall be utilized for the discussion and resolution of current issues and problems identified relating to the medical record audits, the systematic review of resulting variance reports and the provision of medical, dental, mental health and forensic mental health care at Department facilities. Problem identification items that are submitted by the Superintendents and Regional Administrators will be reviewed as well. Attendees at these meetings shall include, but not be limited to, the following individuals:

- a. Director of Health Services;
- b. Deputy Director of health services;
- c. Program Director of the contractual medical provider;
- d. Director of Mental Health Services of the contractual medical provider;
- e. Program Medical Director of the contractual medical provider;
- f. Health Services Division support staff (recorder); and
- g. Health Services Division Contract Manager.

2. Quality Assurance Mortality Review Committee:

- a. The Director of Health Services shall designate a Mortality Review Committee in accordance with 103 DOC 622, Death Procedures. This Committee shall convene on site at the facility where an inmate death has occurred. All members of this committee shall be present for the entire proceeding.

The following individuals or their designees will comprise the Mortality Review Committee:

- i. Director of Health Services or designee
  - ii. Regional Administrator of the facility involved
  - iii. Senior Medical Consultant and/or Senior Mental Health Consultant
  - iv. Superintendent of facility or designee where death occurred (as an observer)
- b. This Committee shall be utilized for reviewing reports of on-site response teams, interviewing staff involved in the emergency response and care of the inmate, and preparing a confidential preliminary report.
- i. Each preliminary report shall be considered complete and ready for review after the preliminary findings of the medical examiner are received by the Director of Health Services.
  - ii. Deaths that occur with inmates who are inpatients at outside hospitals or medical facilities beyond 72 hours, including the Lemuel Shattuck Hospital, are beyond the jurisdiction of the mortality review committee and shall not be included in this process consistent with 103 DOC 622, Death Procedures, section 14.
  - iii. The Mortality Review Committee shall per-form a complete review of the medical record and supporting documentation, interview staff who were directly and indirectly involved in the care of the inmate, discuss the events, symptoms and medical procedures involved in each death, and issue to the Director of Health Services specific recommendations which address any needs identified during the review process. These recommendations shall then be submitted to the superintendent

involved and the Program Director of the contractual clinical group.

- iv. See 601.05, section 5, for deaths as a result of an actual or suspected suicide.

3. Quality Assurance Suicide Review Committee:

Whenever a death has occurred as a result of an actual or suspected suicide the Director of Health Services shall order that the Quality Assurance Mortality review committee expand to include a psychiatric suicide review (see 103 DOC 622, Death Procedures). In addition to the previously listed members of the Mortality Review Committee, the Senior Mental Health Consultant as well as the Mental Health Regional Administrator shall attend the quality assurance suicide review. In addition, the following shall occur:

- a. In the event of attempted suicides by inmates/ detainees/patients the Director of Health Services will determine whether or not it is necessary to convene a Quality Assurance Suicide Review Committee.
- b. The Director of Health Services will convene a case review panel for an inmate who may be at risk of harm to him/herself at any time upon the request of a Superintendent. If a panel is convened, a report with recommendations shall be submitted to the Superintendent and Program Director of the contractual medical provider.

4. Medical Records Committee:

The Director of Health Services shall ensure that through the contractual medical provider a Medical Records Committee is developed for the purpose of discussing current issues, including electronic medical records and, problems relating to policies, procedures, and record keeping. The committee members shall review, revise, and amend medical records forms and medical, dental, and Mental Health forms as appropriate.

The Program Director of the contractual medical provider shall formally appoint members to this committee and submit their names to the Director of Health Services. A Regional Administrator shall attend each meeting of the Medical Records Committee.

5. Policies and Procedures Committee

The Policies and Procedures Committee will have a joint membership of the health services division and the contractual medical provider and shall meet as needed. A Regional Administrator shall attend each meeting of the Policies and Procedures Committee.

The purpose of this Committee is to oversee the development of policies and procedures in accordance with NCCHC and ACA Standards, in conformance with Massachusetts regulations and policies, and the rules and regulations promulgated by the Massachusetts Department of Public Health.

The contractual medical provider's policies and procedures shall not be in conflict with Department of Correction policies. The office of the Director of Health Services shall review for approval all the contractual medical provider's policies and procedures. The DOC Health Services Division office shall perform annual reviews of each of the 600 Series policies and issue revisions as made to the contractual medical provider. The contractual medical provider shall review on an annual basis all of its policies and procedures and revise as appropriate. Each Health Services Administrator and/or site with health services shall have a copy of 103 DOC 600 series and the contractual medical provider's policies and procedures available to any and all health services staff and DOC personnel.

There are policies and procedures unique to Bridgewater State Hospital. These should be

reviewed and approved by the reviewing authority at BSH, the Superintendent or designee, and approved by the Director of Health Services.

601.06     Administrative Meetings

In addition to those formal Committees listed in the previous section of this policy, the following meetings shall be held as deemed necessary by the Director of Health Services:

1.     Quarterly meetings shall be held at the Lemuel Shattuck Hospital for the purpose of maintaining communication with the Shattuck Hospital staff. The following individuals shall attend this meeting:
  - a.     Director of Health Services or Deputy Director of Health Services;
  - b.     Superintendent of the Shattuck Hospital Correctional Unit or Deputy Superintendent;
  - c.     Program Director of the contractual medical provider;
  - d.     designated staff members of the Shattuck Hospital.
2.     Quarterly regional meetings shall be held with the Superintendents of individual facilities, the Director of Health Services and the Deputy Director of Health Services, the Health Services Regional Administrator for that facility, the contractual medical provider Program Director, Health Services Administrator for the facility, and Medical Director as well as other designated contractual staff.

The quarterly meeting held at Bridgewater State Hospital is called The Bridgewater State Hospital Governing Board.

The purpose of these meetings will be to discuss issues regarding the provision of medical, dental, mental and forensic mental health services at the individual facilities.



3. The Director of health services shall, at his/her discretion, or at the written request of a Superintendent, convene a case conference meeting to discuss important health and mental health care issues relating to a particular inmate. Case conference meetings represent an interdisciplinary approach to the treatment needs of a particular individual. Attendance shall be determined by the Director of Health Services and the Program Director of the contractual medical provider.
4. Monthly meetings of the Director of Health Services or Deputy Director with all Regional Administrators and the Mental Health Regional Administrator will be held for the purpose of maintaining communication. Minutes will be taken at these meetings.

601.07 Administrative Reports

The Director of Health Services or her/his designee shall establish that routine administrative reports are to be submitted by the contractual medical provider on a regular basis. A list of the required reports shall be contained within the written contract between the Department and the contractual medical provider.

601.08 Health Service Audits

1. Comprehensive audits of medical, dental and mental health services will be conducted at each major facility at least every four months by DOC Health Services Division management team members using a predetermined audit tool.
2. At any time, and as determined by the Department, the medical records audit will be supplanted by an audit from one of the following categories: Infirmary Audit, Keep on Person (KOP), Self Administration Audit, and Special Needs/Chronic Disease Audit.

3. Additional audits may be performed from time to time as determined by the Director of Health Services.
4. The Department Policy Development and Compliance Unit conducts annual audits at each facility, including health services to measure compliance with ACA standards. Regional administrators may participate as members of this audit team.